BRITISH CARDIAC SOCIETY NEWSLETTER

We have received a total of 581 abstracts for the Glasgow meeting, a 29% increase compared with the number submitted for Torquay. Only a minority can be selected for presentation, but as many as possible of the remaining suitable abstracts will be accepted for posters. Those with the difficult task of selection are not endowed with any unique wisdom, and some posters may contain more valuable information than is available in many of the presentations. Posters receive less attention than they deserve. What can be done to improve this? In their meetings the Irish Cardiac Society arrange for very brief summaries of salient information to be presented by the authors during one of the oral sessions, designed to whet the appetite. Two or three minutes of explanation can also greatly reduce the effort needed to master the printed word. Is it worth considering?

In August last year we raised the question of the initials FESC being used by those elected to the European Fellowship of Cardiology. We think they should be, when it is appropriate to do so; but too few of the members of the British Cardiac Society have this distinction. The European Society states that "a Fellow is considered to be a person who has had a number of years of experience in the field and who has distinguished himself (sic) individually in clinical, educational, investigational, managerial or professional aspects of cardiology . . . Each applicant should be sponsored and signed by two leading cardiovascular specialists or scientists, one of whom must be the President of the National Cardiac Society." The council of the British Cardiac Society believes that only those who have achieved consultant status should have names put forward at the present time. But why have so few decided to do so? Many have the appropriate credentials. The address of the Secretariat is ESC Fellowship Department, 22 Rue Juste Olivier, CH-1260 Nyon, Switzerland.

We have news from the European Resuscitation Council. This multidisciplinary group has representatives from, among others, the European Society of Cardiology, the European Academy of Anaesthesiology, the European Society for Intensive Care Medicine, and all the appropriate national societies. A group from the council met in December with delegates from the American Heart Association, the Heart and Stroke Foundation of Canada, and the Australian Heart Foundation. The purpose was to agree on the terminology of resuscitation and for enough uniformity in the methods of reporting results to permit comparison of data. This is rarely possible at present. The joint chairmen were Richard Cummins of Seattle and Douglas Chamberlain from Brighton. At times the differences in even simple definitions between the continents seemed surprising. But with abundant goodwill on all sides the differences were speedily resolved. The outcome will be reported in due course, probably with near simultaneous publications on the two sides of the Atlantic. The European Resuscitation Council has reached an agreement that will make Resuscitation its official journal. The editor in chief is Dr John McCabe of Syracuse, New York State. The European editor will be your President.

There is more news of the British Cardiac Society. Council recently discussed their concern at the career problems faced by many of those still in training posts. Some have had difficulty in obtaining sound advice from within their own hospitals or had good reasons for wishing to seek other counsels. Others who have been well advised still need more support or broader perspectives. We have therefore instituted a new post which is yet to have a final title. It may be Postgraduate Advisor. In any event, the need to appoint a senior and widely respected figure led to Howard Swanton who has agreed to serve in this capacity. Anyone wishing to obtain his advice can contact him through the society. On a different note, Anthony Nathan has taken over from Ronald Gold as representative of the Society on a British Standards Committee HCC92, which is the pacemaker technical committee of the Health Care Standards Policy Committee.

The authors of this newsletter have thrown caution to the winds and used both first names and surnames throughout. Those members of the society who have taken the trouble to comment on the shift towards the change in policy have indicated approval, so that we have abandoned the careful compromises of earlier months. But now a new note of controversy has been raised by David Hackett. He has asked why the society abstracts have the authors' surnames preceded by initials for men and by first names for women. He regards this as a sexist practice that is outmoded in the egalitarian times of the 1990s. Some of us like it, but we concede (some of us) that we ourselves may be anachronisms, and that in this respect we hold no strong egalitarian views. What do other members think?

Do you believe that we should be increasing the attention we pay to coronary prevention (or risk reduction)? Many cardiologists remain sceptical, not of the concept but only of the possibility for effective action. We believe this position has had some validity but should now be changing. The British Heart Foundation is active in coronary prevention and has arranged an important symposium for clinicians at the Royal College of Physicians of Edinburgh on 30 and 31 May. The programme has many hot topics such as the importance of fibrinogen and clotting factors, lipoprotein (a), and insulin resistance. The course fee is £100 reduced to £50 for medical staff in training. Information can be obtained from John McGhee, Edinburgh Co-ordinates, 30 Caiystane Crescent, Edinburgh EH10 6RX (031 445 5601). We are prepared to remind members of conferences that we believe will be important, but to do this we need prompting ourselves. We will, however, be selective with a bias towards the British Heart Foundation and our affiliated groups. Would our readers like to be reminded of dates for submitting abstracts to the principal meetings and of dates for submitting applications for major grants and fellowships? Tell us. And please note our change of

> DOUGLAS CHAMBERLAIN President, British Cardiac Society PAUL OLDERSHAW Secretary, British Cardiac Society, 1 St Andrew's Place, London NW1 4LB

NOTICES

1991

The Annual Meeting of the **British Cardiac Society** will take place at the Scottish Exhibition Centre, Glasgow on 30 April to 3 May. The closing date for receipt of abstracts was 10 December 1990.

An international congress on angiology entitled **Angio 91** will be held in Paris on 12 to 14 April: Scientific Organising Committee Secretariat, 3 place des Vosges, 75004 Paris, France (33 1 42746464).

XII international congress on **Hemostasis** and **Thrombosis** will be held in Buenos Aires on 18 to 22 November: Secretary, Sarmiento 1562-4to. F, 1042 Buenos Aires, Argentina (54 1 35 6703/2798).